

State: Arizona Filing Company: Central Mutual Insurance Company  
 TOI/Sub-TOI: 19.0 Personal Auto/19.0001 Private Passenger Auto (PPA)  
 Product Name: Personal Auto Rate Change  
 Project Name/Number: Personal Auto Rate Change/

## Table of Contents

### User Usage Agreement Attachments

Usage Agreement [Usage Agreement.pdf](#)

### Rate-Rule Attachments

(ex. Document Name Attachment Name)

AZ PA Rate Pages	<a href="#">AZ PA 2024.02.01 - Rate Pages DOI.pdf</a>
Auto Plus	<a href="#">Rule 307 Auto Plus.pdf</a>
Auto Plus	<a href="#">[Compare Report] Rule 307 Auto Plus.pdf</a>
Central Mutual Summit	<a href="#">Rule 308- Central Mutual Summit.pdf</a>
Central Mutual Summit	<a href="#">[Compare Report] Rule 308- Central Mutual Summit.pdf</a>
Central Mutual Signature	<a href="#">Rule 309- Central Mutual Signature.pdf</a>
Central Mutual Signature	<a href="#">[Compare Report] Rule 309- Central Mutual Signature.pdf</a>
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Agreed Value Private Passenger	<a href="#">[Compare Report] Rule 314- Agreed Value Private Passenger.pdf</a>
Agreed Value Limited Use	<a href="#">Rule 315- Agreed Value Limited Use.pdf</a>
Agreed Value Limited Use	<a href="#">[Compare Report] Rule 315- Agreed Value Limited Use.pdf</a>

### Supporting Document Attachments

(ex. Supporting Document Name Attachment Name)

19.0 Personal Auto Lines Rate/Rule Checklist	<a href="#">19_0 Personal Auto Rate Rule Filing Checklist.pdf</a>
Actuarial Memorandum Requirements	<a href="#">Actuarial Memo.pdf</a>
Actuarial Supporting Exhibit Requirements - Article 4.1	<a href="#">AZ PA 2024.02.01 - Actuarial Support DOI.pdf</a>
Actuarial Supporting Exhibit Requirements - Article 4.1	<a href="#">AZ PA 2024.02.01 - Indications DOI.pdf</a>
General Filing Checklist and Instructions - All Lines	<a href="#">General Filing Checklist.pdf</a>

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## Filing at a Glance

Company: Central Mutual Insurance Company  
Product Name: Personal Auto Rate Change  
State: Arizona  
TOI: 19.0 Personal Auto  
Sub-TOI: 19.0001 Private Passenger Auto (PPA)  
Filing Type: Rate/Rule  
Date Submitted: 10/26/2023  
SERFF Tr Num: CEMC-133867315  
SERFF Status: Closed-Acknowledged  
State Tr Num: CEMC-133867315  
State Status: Filing Acknowledged  
Co Tr Num:

Effective Date: 02/01/2024  
Requested (New):  
Effective Date: 02/01/2024  
Requested (Renewal):  
Author(s): Jennifer Best  
Reviewer(s): Kaylee Baumstark (primary)  
Disposition Date: 11/09/2023  
Disposition Status: Acknowledged  
Effective Date (New):  
Effective Date (Renewal):

**State:** Arizona **Filing Company:** Central Mutual Insurance Company  
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## General Information

Project Name: Personal Auto Rate Change Status of Filing in Domicile: Not Filed  
 Project Number: Domicile Status Comments:  
 Reference Organization: Insurance Servies Office Reference Number: PP-2021-RLP1  
 Reference Title: 2020 LPMP symbols Advisory Org. Circular: LI-PA-2021-234  
 Filing Status Changed: 11/09/2023  
 State Status Changed: 11/09/2023 Deemer Date:  
 Created By: Jennifer Best Submitted By: Jennifer Best  
 Corresponding Filing Tracking Number: CEMC-133867856,  
 CEMC-133867887, CEMC- 133867897

### Filing Description:

Central Mutual Insurance Co has rules and rates on file with your department. Effective 2-1-2024 we wish to place the following revisions on file:

- Base rate changes have been applied to reflect the indicated rate changes by coverage (Including UM)
- Proposing an increase in Auto Plus, Summit, and Signature endorsements
- Model Years 2025 and 2026 have been added; shifting the remaining model year factors up two years
- Vehicles will have their Liability and Medical Payment symbols updated to adopt 2020 LPMP symbols from the previous 2016 LPMP symbols, per ISO filing designation PP-2021-RLP1 (ISOF-132961684)
- Increased Comprehensive Deductible factors with Full Coverage Glass
- Increased Agreed Value Collision rates to account for unfavorable companywide loss experience

We trust this filing will meet with your approval,

## Company and Contact

### Filing Contact Information

Jennifer Best, Rates & Forms Analyst jbest@central-insurance.com  
 800 S Washington St 419-238-5551 [Phone]  
 Van Wert , OH 45891

### Filing Company Information

Central Mutual Insurance Company	CoCode: 20230	State of Domicile: Ohio
PO Box 351	Group Code: 36	Company Type:
800 S. Washington St.	Group Name: Central Insurance	State ID Number:
Van Wert, OH 45891	FEIN Number: 34-4202560	
(800) 736-7000 ext. [Phone]		

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**State:** Arizona **Filing Company:** Central Mutual Insurance Company  
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## Filing Fees

### State Fees

Fee Required? No

Retaliatory? No

Fee Explanation:

SERFF Tracking #:

CEMC-133867315

State Tracking #:

CEMC-133867315

Company Tracking #:

State:

Arizona

Filing Company:

Central Mutual Insurance Company

TOI/Sub-TOI:

19.0 Personal Auto/19.0001 Private Passenger Auto (PPA)

Product Name:

Personal Auto Rate Change

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Personal Auto Rate Change/

## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Acknowledged	Kaylee Baumstark	11/09/2023	11/09/2023

SERFF Tracking #:

CEMC-133867315

State Tracking #:

CEMC-133867315

Company Tracking #:

State: Arizona

Filing Company:

Central Mutual Insurance Company

TOI/Sub-TOI: 19.0 Personal Auto/19.0001 Private Passenger Auto (PPA)

Product Name: Personal Auto Rate Change

Project Name/Number: Personal Auto Rate Change/

## Disposition

Disposition Date: 11/09/2023

Effective Date (New):

Effective Date (Renewal):

Status: Acknowledged

Comment: This acknowledges receipt of your rate/rule filing. Pursuant to ARS § 20-385 (A) Arizona is a "use and file" state. If the Department subsequently finds that a rate does not comply with ARS § 20-383, the Department may reengage with the filer regarding new or existing objections. The Director must issue an Order disapproving the rate which would not affect any policy issued prior to the effective date of the Order is affected. Please see ARS § 20-388.

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	Number of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where req'd):	Minimum % Change (where req'd):
Central Mutual Insurance Company	7.200%	7.100%	\$445,077	2,990	\$6,280,119	21.900%	-17.300%

Schedule	Schedule Item	Schedule Item Status	Public Access
Rate	AZ PA Rate Pages		Yes
Rate	Auto Plus		Yes
Rate	Central Mutual Summit		Yes
Rate	Central Mutual Signature		Yes
Rate	Agreed Value Private Passenger		Yes
Rate	Agreed Value Limited Use		Yes
Supporting Document	19.0 Personal Auto Lines Rate/Rule Checklist		Yes
Supporting Document	Actuarial Memorandum Requirements		Yes
Supporting Document	Actuarial Supporting Exhibit Requirements - Article 4.1		Yes
Supporting Document	General Filing Checklist and Instructions - All Lines		Yes
Supporting Document	Predictive Model Checklist		Yes
Supporting Document	UBI/Telematics Model		Yes

**State:** Arizona **Filing Company:** Central Mutual Insurance Company  
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## Post Submission Update Request Processed On 10/26/2023

Status: Allowed  
Created By: Jennifer Best  
Processed By: Kaylee Baumstark  
Comments:

### General Information:

Field Name	Requested Change	Prior Value
Corresponding Filing Tracking Number	CEMC-133867856, CEMC-133867887, CEMC- 133867897	

SERFF Tracking #:

CEMC-133867315

State Tracking #:

CEMC-133867315

Company Tracking #:

State:

Arizona

Filing Company:

Central Mutual Insurance Company

TOI/Sub-TOI:

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Product Name:

Personal Auto Rate Change

Project Name/Number:

Personal Auto Rate Change/

## Rate Information

Rate data applies to filing.

Filing Method:

file and use

Rate Change Type:

Increase

Overall Percentage of Last Rate Revision:

7.900%

Effective Date of Last Rate Revision:

09/01/2023

Filing Method of Last Filing:

file and use

SERFF Tracking Number of Last Filing:

CEMC-133637596

## Company Rate Information

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	Number of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where req'd):	Minimum % Change (where req'd):
Central Mutual Insurance Company	7.200%	7.100%	\$445,077	2,990	\$6,280,119	21.900%	-17.300%



SERFF Tracking #:

CEMC-133867315

State Tracking #:

CEMC-133867315

Company Tracking #:

State:

Arizona

Filing Company:

Central Mutual Insurance Company

TOI/Sub-TOI:

19.0 Personal Auto/19.0001 Private Passenger Auto (PPA)

Product Name:

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Project Name/Number:

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## Rate/Rule Schedule

Item No.	Schedule Item Status	Exhibit Name	Rule # or Page #	Rate Action	Previous State Filing Number	Attachments
1		AZ PA Rate Pages		Replacement	CEMC-133637596	AZ PA 2024.02.01 - Rate Pages DOI.pdf
2		Auto Plus	307	Replacement	CEMC-132770744	Rule 307 Auto Plus.pdf [Compare Report] Rule 307 Auto Plus.pdf
3		Central Mutual Summit	308	Replacement	CEMC-132770744	Rule 308- Central Mutual Summit.pdf [Compare Report] Rule 308- Central Mutual Summit.pdf
4		Central Mutual Signature	309	Replacement	CEMC-132770744	Rule 309- Central Mutual Signature.pdf [Compare Report] Rule 309- Central Mutual Signature.pdf
5		Agreed Value Private Passenger	314	Replacement	CEMC-133770744	Rule 314- Agreed Value Private Passenger.pdf [Compare Report] Rule 314- Agreed Value Private Passenger.pdf
6		Agreed Value Limited Use	315	Replacement	CEMC-132770744	Rule 315- Agreed Value Limited Use.pdf [Compare Report] Rule 315- Agreed Value Limited Use.pdf

SERFF Tracking #:

CEMC-133867315

State Tracking #:

CEMC-133867315

Company Tracking #:

State:

Arizona

Filing Company:

Central Mutual Insurance Company

TOI/Sub-TOI:

19.0 Personal Auto/19.0001 Private Passenger Auto (PPA)

Product Name:

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Project Name/Number:

Personal Auto Rate Change/

## Supporting Document Schedules

<b>Satisfied - Item:</b>	19.0 Personal Auto Lines Rate/Rule Checklist
<b>Comments:</b>	
<b>Attachment(s):</b>	19_0 Personal Auto Rate Rule Filing Checklist.pdf
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Satisfied - Item:</b>	Actuarial Memorandum Requirements
<b>Comments:</b>	
<b>Attachment(s):</b>	Actuarial Memo.pdf
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Satisfied - Item:</b>	Actuarial Supporting Exhibit Requirements - Article 4.1
<b>Comments:</b>	
<b>Attachment(s):</b>	AZ PA 2024.02.01 - Actuarial Support DOI.pdf AZ PA 2024.02.01 - Indications DOI.pdf
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Satisfied - Item:</b>	General Filing Checklist and Instructions - All Lines
<b>Comments:</b>	
<b>Attachment(s):</b>	General Filing Checklist.pdf
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Bypassed - Item:</b>	Predictive Model Checklist
<b>Bypass Reason:</b>	n/a
<b>Attachment(s):</b>	
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Bypassed - Item:</b>	UBI/Telematics Model
<b>Bypass Reason:</b>	n/a
<b>Attachment(s):</b>	
<b>Item Status:</b>	

**SERFF Tracking #:**

CEMC-133867315

**State Tracking #:**

CEMC-133867315

**Company Tracking #:**

**State:**

Arizona

**Filing Company:**

Central Mutual Insurance Company

**TOI/Sub-TOI:**

19.0 Personal Auto/19.0001 Private Passenger Auto (PPA)

**Product Name:**

Personal Auto Rate Change

**Project Name/Number:**

Personal Auto Rate Change/

**Status Date:**

CENTRAL MUTUAL INSURANCE COMPANY - Arizona Personal Auto Rate Pages - Effective 02/01/2024

Step 000 - Base Rates

<b>Territory</b>	<b>CSL000</b>	<b>BI000</b>	<b>PD000</b>	<b>MP000</b>	<b>COMP000</b>	<b>COLL000</b>
Statewide	466.07	176.09	197.78	34.64	165.78	421.91

Step 070 - Model Year

<b>Model Year Factor</b>	<b>CSL070</b>	<b>BI070</b>	<b>PD070</b>	<b>MP070</b>	<b>COMP070</b>	<b>COLL070</b>
2026	1.000	1.000	1.000	1.000	1.001	1.000
2025	1.000	1.000	1.000	1.000	1.001	1.000
2024	1.000	1.000	1.000	1.000	1.001	1.000
2023	1.000	1.000	1.000	1.000	1.001	1.000
2022	1.000	1.000	1.000	1.000	1.000	1.000
2021	1.000	1.000	1.000	1.000	0.993	0.997
2020	1.000	1.000	1.000	1.000	0.982	0.987
2019	1.000	1.000	1.000	1.000	0.965	0.971
2018	1.000	1.000	1.000	1.000	0.943	0.948
2017	1.000	1.000	1.000	1.000	0.916	0.918
2016	1.000	1.000	1.000	1.000	0.883	0.882
2015	1.000	1.000	1.000	1.000	0.846	0.840
2014	1.000	1.000	1.000	1.000	0.803	0.791
2013	1.000	1.000	1.000	1.000	0.755	0.735
2012	1.000	1.000	1.000	1.000	0.702	0.673
2011	1.000	1.000	1.000	1.000	0.644	0.604
2010	1.000	1.000	1.000	1.000	0.580	0.529
2009	1.000	1.000	1.000	1.000	0.512	0.450
2008	1.000	1.000	1.000	1.000	0.450	0.450
2007	1.000	1.000	1.000	1.000	0.450	0.450
2006	1.000	1.000	1.000	1.000	0.450	0.450
2005	1.000	1.000	1.000	1.000	0.450	0.450
2004	1.000	1.000	1.000	1.000	0.450	0.450
2003	1.000	1.000	1.000	1.000	0.450	0.450
2002	1.000	1.000	1.000	1.000	0.450	0.450
2001	1.000	1.000	1.000	1.000	0.450	0.450
2000	1.000	1.000	1.000	1.000	0.450	0.450
1999	1.000	1.000	1.000	1.000	0.450	0.450
1998	1.000	1.000	1.000	1.000	0.450	0.450
1997	1.000	1.000	1.000	1.000	0.450	0.450
1996	1.000	1.000	1.000	1.000	0.450	0.450
1995	1.000	1.000	1.000	1.000	0.450	0.450
1994	1.000	1.000	1.000	1.000	0.450	0.450
1993	1.000	1.000	1.000	1.000	0.450	0.450
1992	1.000	1.000	1.000	1.000	0.450	0.450
1991	1.000	1.000	1.000	1.000	0.450	0.450
1990	1.000	1.000	1.000	1.000	0.450	0.450

Step 120 - Deductible

<b>Deductible</b>	<b>Full Coverage Glass</b>	<b>CSL120</b>	<b>BI120</b>	<b>PD120</b>	<b>MP120</b>	<b>COMP120</b>	<b>COLL120</b>
Full Coverage	N/A	1.000	1.000	1.000	1.000	1.850	
50	No	1.000	1.000	1.000	1.000	1.700	
100	No	1.000	1.000	1.000	1.000	1.570	1.210
200	No	1.000	1.000	1.000	1.000	1.340	1.140
250	No	1.000	1.000	1.000	1.000	1.250	1.110
500	No	1.000	1.000	1.000	1.000	1.000	1.000
1,000	No	1.000	1.000	1.000	1.000	0.760	0.850
1,500	No	1.000	1.000	1.000	1.000	0.630	0.720
2,000	No	1.000	1.000	1.000	1.000	0.540	0.620
2,500	No	1.000	1.000	1.000	1.000	0.460	0.540
5,000	No	1.000	1.000	1.000	1.000	0.400	0.450
10,000	No	1.000	1.000	1.000	1.000	0.280	0.360
50	Yes	1.000	1.000	1.000	1.000	2.720	
100	Yes	1.000	1.000	1.000	1.000	2.677	1.210
200	Yes	1.000	1.000	1.000	1.000	2.602	1.140
250	Yes	1.000	1.000	1.000	1.000	2.581	1.110
500	Yes	1.000	1.000	1.000	1.000	2.473	1.000
1,000	Yes	1.000	1.000	1.000	1.000	2.387	0.850
1,500	Yes	1.000	1.000	1.000	1.000	2.129	0.720
2,000	Yes	1.000	1.000	1.000	1.000	2.086	0.620
2,500	Yes	1.000	1.000	1.000	1.000	1.613	0.540
5,000	Yes	1.000	1.000	1.000	1.000	1.403	0.450
10,000	Yes	1.000	1.000	1.000	1.000	1.212	0.360

Uninsured Motorists / Underinsured Motorists

**Uninsured Motorists Single Limit**

LIMIT	Territory Group A	
	Single Car	Multi-Car per Car
65,000	63	50
75,000	67	55
100,000	75	60
200,000	92	75
300,000	105	84
500,000	106	85

Territory Group B	
Single Car	Multi-Car per Car
41	33
47	36
50	39
64	52
72	56
74	59

**Uninsured Motorists Bodily Injury**

LIMIT	Territory Group A	
	Single Car	Multi-Car per Car
25,000 / 50,000	43	35
50,000 / 100,000	60	49
100,000 / 300,000	77	62
250,000 / 500,000	100	80
300,000 / 300,000	105	84
500,000 / 500,000	106	85

Territory Group B	
Single Car	Multi-Car per Car
30	24
41	33
52	41
67	55
72	56
74	59

**Uninsured and Under-Insured Motorists Single Limit**

LIMIT	Territory Group A	
	Single Car	Multi-Car per Car
65,000	131	105
75,000	143	115
100,000	175	140
200,000	243	194
300,000	292	235
500,000	330	263

Territory Group B	
Single Car	Multi-Car per Car
90	72
98	78
118	94
166	134
200	160
223	178

**Uninsured and Under-Insured Motorists Bodily Injury**

LIMIT	Territory Group A	
	Single Car	Multi-Car per Car
25,000 / 50,000	66	53
50,000 / 100,000	113	90
100,000 / 300,000	181	144
250,000 / 500,000	281	225
300,000 / 300,000	292	235
500,000 / 500,000	330	263

Territory Group B	
Single Car	Multi-Car per Car
47	36
77	62
123	98
191	153
200	160
223	178

Refer to the Territory Definitions to determine which UM Territory Group each Zip Code (Territory) falls within.

**ARIZONA (02)**

5. The policy and/or underwriting reports must indicate no more than:
  - a. One Bodily Injury, Property Damage, Medical Payments, Personal Injury Protection, or Collision paid losses for any driver on the policy in the three year time period immediately preceding the preparation of the renewal; or,
  - b. Two Bodily Injury, Property Damage, Medical Payments, Personal Injury Protection, or Collision paid losses for any household in the three year time period immediately preceding the preparation of the renewal; or,
  - c. No more than two total Other than Collision paid losses in the three year time period immediately preceding the preparation of the renewal.
6. The renewal underwriting reports must indicate no violations of the following types for any driver currently in the household:
  - a. In the seven year period immediately preceding the preparation of the renewal policy:
    - (a) All major violations as denoted in the SDIP rules.
    - (b) All license suspensions
  - b. In the three year period immediately preceding the preparation of the renewal policy:
    - (a) No more than 1 speed or failure to obey violation per driver.
    - (b) No more than 2 speed or failure to obey violations per household.
7. In the three year period immediately preceding the preparation of the renewal policy:
  - a. No more than a total of 2 of the following violations or losses combined in the household: Bodily Injury, Property Damage, Medical Payments, Personal Injury Protection, Other than Collision, or Collision losses and speeding or failure to obey violations.

Should an eligible policy meet all the criteria above, a credit will be applied based upon the years in force and the insurance score at inception.

**B. Premium**

Refer to Rate Pages **510** and the Premium Sequence rule for rate structure.

**307. AUTO PLUS ENDORSEMENT**

**A. Introduction**

Auto Plus is a unique product offering which provides additional coverages to the base Personal Auto policy. This endorsement is not to be included if a Summit or Signature endorsement is selected.

**B. Premium**

Initial private passenger, limited use auto, or corporate auto \$50

★★

Each additional private passenger, limited use auto, or corporate auto \$4

**C. Endorsement**

Use Auto Plus Endorsement **3-1482**.



ARIZONA (02)

**308. CENTRAL MUTUAL SUMMIT® AUTO**

**A. Introduction**

Central Mutual Summit is a unique product offering which provides additional coverages to the base Personal Auto policy. This endorsement is not to be included if the Auto Plus or Signature endorsement is selected.

★★

**B. Premium**

Initial private passenger, limited use auto, or corporate auto \$98

Each additional private passenger, limited use auto, or corporate auto \$29

**C. Endorsement**

Use the Central Mutual Summit® Endorsement **3-2768**.

**309. CENTRAL MUTUAL SIGNATURE®**

**A. Introduction**

Central Mutual Signature is a unique product offering which provides additional coverages to the base Personal Auto policy. This endorsement is not to be included if the Auto Plus or Summit endorsement is selected.

★★

**B. Rates**

Initial private passenger, limited use auto, or corporate auto \$113

Each additional private passenger, limited use auto, or corporate auto \$32

**C. Endorsement**

Use the Central Signature® Auto Endorsement **3-2995**.

**310. HOMEOWNERS - AUTOMOBILE DEDUCTIBLE WAIVER**

**A. Introduction**

1. If one loss damages both the auto(s) and home, we will apply only one deductible to the combined amount of the loss provided the insured has insurance with us for auto and homeowners and each policy provides coverage.
2. The larger of the Homeowners or Automobile deductibles will be applied.
3. This rule will not be applicable if the insured would otherwise receive a larger payment.

**B. Premium**

No charge applies.

**C. Endorsement**

Use Endorsement **20-1456** Homeowners-Automobile Deductible Waiver.

ARIZONA (02)

**308. CENTRAL MUTUAL SUMMIT® AUTO**

**A. Introduction**

Central Mutual Summit is a unique product offering which provides additional coverages to the base Personal Auto policy. This endorsement is not to be included if the Auto Plus or Signature endorsement is selected.

★★

**B. Premium**

Initial private passenger, limited use auto, or corporate auto \$98

Each additional private passenger, limited use auto, or corporate auto \$29

**C. Endorsement**

Use the Central Mutual Summit® Endorsement **3-2768**.

**309. CENTRAL MUTUAL SIGNATURE®**

**A. Introduction**

Central Mutual Signature is a unique product offering which provides additional coverages to the base Personal Auto policy. This endorsement is not to be included if the Auto Plus or Summit endorsement is selected.

★★

**B. Rates**

Initial private passenger, limited use auto, or corporate auto \$113

Each additional private passenger, limited use auto, or corporate auto \$32

**C. Endorsement**

Use the Central Signature® Auto Endorsement **3-2995**.

**310. HOMEOWNERS - AUTOMOBILE DEDUCTIBLE WAIVER**

**A. Introduction**

1. If one loss damages both the auto(s) and home, we will apply only one deductible to the combined amount of the loss provided the insured has insurance with us for auto and homeowners and each policy provides coverage.
2. The larger of the Homeowners or Automobile deductibles will be applied.
3. This rule will not be applicable if the insured would otherwise receive a larger payment.

**B. Premium**

No charge applies.

**C. Endorsement**

Use Endorsement **20-1456** Homeowners-Automobile Deductible Waiver.

ARIZONA (02)

2. The total annual premium for the policy is paid in full by the due date on the billing statement.

If payment is returned due to non-sufficient funds, the discount shall be removed from the policy.

Refer to Rate Rule **440** for the applicable rate factor.

**313. NUMBER OF VEHICLES**

**A. Introduction**

1. The number of vehicles is determined by counting the following vehicle types to determine the number of vehicles used in Rate Rule **200** are:
  - a. Private Passenger Vehicles
2. If Central Insurance Companies provides coverage for one private passenger vehicle, and the named insured has another private passenger vehicle furnished for regular use which is owned by a corporation, co-partnership, or unincorporated association and the corporation, co-partnership, or unincorporated association provides the insurance coverage for all uses of the vehicle, then that additional private passenger vehicle is counted in the number of vehicles Rate Rule **200**.
3. If a new business application insures one or more vehicle(s) and the named insured owns additional vehicle(s) on the policy inception date and an endorsement adding the additional vehicle(s) during the initial policy period is submitted with the application, then include the additional vehicles(s) when determining the number of vehicles for Rate Rule **200**. This is permitted on the policy inception only.

**314. AGREED VALUE – PRIVATE PASSENGER AUTOS**

★★ **A. Introduction**

When a private passenger auto, pickup, or van is insured for agreed value, the rates from the below schedule are added to the vehicle's Other than Collision and Collision premiums after all other rating factors, discounts and surcharges have been applied.

AGREED VALUE	OTC	COLLISION
\$0-\$30,000	\$25	\$26
\$30,001-\$60,000	\$50	\$52
\$60,001-\$90,000	\$75	\$78
\$90,001 and greater	\$100	\$123

**B. Endorsement**

Use **3-3060** Agreed Value Coverage for auto policies that include the Signature endorsement.

Use **3-3059** Agreed Value Coverage for auto policies that include the Summit endorsement.

Use **3-3058** for all other auto policies.

ARIZONA (02)

**315. AGREED VALUE – LIMITED USE AUTOS**

★★ **A. Introduction**

When a Limited Use Vehicle auto is insured for Agreed Value, the rates from the below schedule are added to the vehicle's Other than Collision and Collision premiums after all other rating factors, discounts and surcharges have been applied.

AGREED VALUE	OTC	COLLISION
\$0-\$30,000	\$25	\$26
\$30,001-\$60,000	\$50	\$52
\$60,001-\$90,000	\$75	\$78
\$90,001 and greater	\$100	\$123

**B. Endorsement**

Use **3-3061** Agreed Value Coverage- Limited Use Autos

**316. TeenSMART®**

**A. Introduction**

1. TeenSMART® is a driver improvement course for teen drivers.

**B. Eligibility**

1. TeenSMART® Participation- A discount is applied when the course is purchased. It will be removed if the certification is not completed within six months but can be re-applied once certification is completed.
2. TeenSMART® Certification – A discount is applied when the course is completed.

**C. Rate**

1. TeenSMART® Participation- See Rate Rule **530** for applicable rate factors.
2. TeenSMART® Certification- See Rate Rule **540** for applicable rate factors.

**317. NEW TEEN DRIVER FAMILY LOYALTY DISCOUNT**

**A. Introduction**

1. Based upon the tenure of the named insured with Central Mutual, a rate factor is applied to Single Limit Liability, Bodily Injury, Property Damage, Medical Payments, and Collision for youthful operators who:
  - a. Are less than age 20; and
  - b. Are newly added to the policy on or after March 1, 2015
2. For purposes of this rule, the policy age is determined by the original inception date of the policy and the current policy's effective date.

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# Compare Results

Old File:

**A9ejsq91\_dp6faf\_40w.tmp**

**1 page (3 KB)**

10/25/2023 2:23:16 PM

versus

New File:

**Rule 307 Auto Plus.pdf**

**1 page (112 KB)**

10/25/2023 1:49:41 PM

## Total Changes

**3**

## Content

**2** Replacements  
**1** Insertion  
**0** Deletions

## Styling and Annotations

**0** Styling  
**0** Annotations

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ARIZONA (02)

5. The policy and/or underwriting reports must indicate no more than:
  - a. One Bodily Injury, Property Damage, Medical Payments, Personal Injury Protection, or Collision paid losses for any driver on the policy in the three year time period immediately preceding the preparation of the renewal; or,
  - b. Two Bodily Injury, Property Damage, Medical Payments, Personal Injury Protection, or Collision paid losses for any household in the three year time period immediately preceding the preparation of the renewal; or,
  - c. No more than two total Other than Collision paid losses in the three year time period immediately preceding the preparation of the renewal.
6. The renewal underwriting reports must indicate no violations of the following types for any driver currently in the household:
  - a. In the seven year period immediately preceding the preparation of the renewal policy:
    - (a) All major violations as denoted in the SDIP rules.
    - (b) All license suspensions
  - b. In the three year period immediately preceding the preparation of the renewal policy:
    - (a) No more than 1 speed or failure to obey violation per driver.
    - (b) No more than 2 speed or failure to obey violations per household.
7. In the three year period immediately preceding the preparation of the renewal policy:
  - a. No more than a total of 2 of the following violations or losses combined in the household: Bodily Injury, Property Damage, Medical Payments, Personal Injury Protection, Other than Collision, or Collision losses and speeding or failure to obey violations.

Should an eligible policy meet all the criteria above, a credit will be applied based upon the years in force and the insurance score at inception.

**B. Premium**

Refer to Rate Pages **510** and the Premium Sequence rule for rate structure.

**307. AUTO PLUS ENDORSEMENT**

**A. Introduction**

Auto Plus is a unique product offering which provides additional coverages to the base Personal Auto policy. This endorsement is not to be included if a Summit or Signature endorsement is selected.

**B. Premium**

Initial private passenger, limited use auto, or corporate auto \$50



Each additional private passenger, limited use auto, or corporate auto \$4

**C. Endorsement**

Use Auto Plus Endorsement **3-1482**.

# Compare Results

Old File:

**A914qop2c\_dp6fb5\_40w.tmp**

**1 page (3 KB)**

10/25/2023 2:25:19 PM

versus

New File:

**Rule 308- Central Mutual Summit.pdf**

**1 page (112 KB)**

10/25/2023 1:50:42 PM

## Total Changes

9

## Content

- 7 Replacements
- 1 Insertion
- 1 Deletion

## Styling and Annotations

- 0 Styling
- 0 Annotations

[Go to First Change \(page 1\)](#)

ARIZONA (02)

**308. CENTRAL MUTUAL SUMMIT® AUTO**

**A. Introduction**

Central Mutual Summit is a unique product offering which provides additional coverages to the base Personal Auto policy. This endorsement is not to be included if the Auto Plus or Signature endorsement is selected.

★★

**B. Premium**

Initial private passenger, limited use auto, or corporate auto \$98

Each additional private passenger, limited use auto, or corporate auto \$29

**C. Endorsement**

Use the Central Mutual Summit® Endorsement **3-2768**.

**309. CENTRAL MUTUAL SIGNATURE®**

**A. Introduction**

Central Mutual Signature is a unique product offering which provides additional coverages to the base Personal Auto policy. This endorsement is not to be included if the Auto Plus or Summit endorsement is selected.

★★

**B. Rates**

Initial private passenger, limited use auto, or corporate auto \$113

Each additional private passenger, limited use auto, or corporate auto \$32

**C. Endorsement**

Use the Central Signature® Auto Endorsement **3-2995**.

**310. HOMEOWNERS - AUTOMOBILE DEDUCTIBLE WAIVER**

**A. Introduction**

1. If one loss damages both the auto(s) and home, we will apply only one deductible to the combined amount of the loss provided the insured has insurance with us for auto and homeowners and each policy provides coverage.
2. The larger of the Homeowners or Automobile deductibles will be applied.
3. This rule will not be applicable if the insured would otherwise receive a larger payment.

**B. Premium**

No charge applies.

**C. Endorsement**

Use Endorsement **20-1456** Homeowners-Automobile Deductible Waiver.



# Compare Results

Old File:

**A914qop2c\_dp6fb5\_40w.tmp**

**1 page (3 KB)**

10/25/2023 2:25:19 PM

versus

New File:

**Rule 309- Central Mutual Signature.pdf**

**1 page (112 KB)**

10/25/2023 1:51:39 PM

## Total Changes

9

## Content

- 7 Replacements
- 1 Insertion
- 1 Deletion

## Styling and Annotations

- 0 Styling
- 0 Annotations

[Go to First Change \(page 1\)](#)

ARIZONA (02)

**308. CENTRAL MUTUAL SUMMIT® AUTO**

**A. Introduction**

Central Mutual Summit is a unique product offering which provides additional coverages to the base Personal Auto policy. This endorsement is not to be included if the Auto Plus or Signature endorsement is selected.

★★

**B. Premium**

Initial private passenger, limited use auto, or corporate auto \$98

Each additional private passenger, limited use auto, or corporate auto \$29

**C. Endorsement**

Use the Central Mutual Summit® Endorsement **3-2768**.

**309. CENTRAL MUTUAL SIGNATURE®**

**A. Introduction**

Central Mutual Signature is a unique product offering which provides additional coverages to the base Personal Auto policy. This endorsement is not to be included if the Auto Plus or Summit endorsement is selected.

★★

**B. Rates**

Initial private passenger, limited use auto, or corporate auto \$113

Each additional private passenger, limited use auto, or corporate auto \$32

**C. Endorsement**

Use the Central Signature® Auto Endorsement **3-2995**.

**310. HOMEOWNERS - AUTOMOBILE DEDUCTIBLE WAIVER**

**A. Introduction**

1. If one loss damages both the auto(s) and home, we will apply only one deductible to the combined amount of the loss provided the insured has insurance with us for auto and homeowners and each policy provides coverage.
2. The larger of the Homeowners or Automobile deductibles will be applied.
3. This rule will not be applicable if the insured would otherwise receive a larger payment.

**B. Premium**

No charge applies.

**C. Endorsement**

Use Endorsement **20-1456** Homeowners-Automobile Deductible Waiver.

# Compare Results

Old File:

**A9193ckrb\_dp6fce\_40w.tmp**

**1 page (3 KB)**

10/25/2023 2:27:18 PM

versus

New File:

**Rule 314- Agreed Value Private Passenger.pdf**

**1 page (114 KB)**

10/25/2023 1:52:43 PM

## Total Changes

**7**

## Content

- 7** Replacements
- 0** Insertions
- 0** Deletions

## Styling and Annotations

- 0** Styling
- 0** Annotations

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**ARIZONA (02)**

2. The total annual premium for the policy is paid in full by the due date on the billing statement.

If payment is returned due to non-sufficient funds, the discount shall be removed from the policy.

Refer to Rate Rule **440** for the applicable rate factor.

<b>313. NUMBER OF VEHICLES</b>
--------------------------------

**A. Introduction**

1. The number of vehicles is determined by counting the following vehicle types to determine the number of vehicles used in Rate Rule **200** are:
  - a. Private Passenger Vehicles
2. If Central Insurance Companies provides coverage for one private passenger vehicle, and the named insured has another private passenger vehicle furnished for regular use which is owned by a corporation, co-partnership, or unincorporated association and the corporation, co-partnership, or unincorporated association provides the insurance coverage for all uses of the vehicle, then that additional private passenger vehicle is counted in the number of vehicles Rate Rule **200**.
3. If a new business application insures one or more vehicle(s) and the named insured owns additional vehicle(s) on the policy inception date and an endorsement adding the additional vehicle(s) during the initial policy period is submitted with the application, then include the additional vehicles(s) when determining the number of vehicles for Rate Rule **200**. This is permitted on the policy inception only.

<b>314. AGREED VALUE – PRIVATE PASSENGER AUTOS</b>
--

**★★ A. Introduction**

When a private passenger auto, pickup, or van is insured for agreed value, the rates from the below schedule are added to the vehicle's Other than Collision and Collision premiums after all other rating factors, discounts and surcharges have been applied.

<b>AGREED VALUE</b>	<b>OTC</b>	<b>COLLISION</b>
\$0-\$30,000	\$25	\$26
\$30,001-\$60,000	\$50	\$52
\$60,001-\$90,000	\$75	\$78
\$90,001 and greater	\$100	\$123

**B. Endorsement**

Use **3-3060** Agreed Value Coverage for auto policies that include the Signature endorsement.

Use **3-3059** Agreed Value Coverage for auto policies that include the Summit endorsement.

Use **3-3058** for all other auto policies.

# Compare Results

Old File:

**A918iww35\_dp6fd2\_40w.tmp**

**1 page (3 KB)**

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versus

New File:

**Rule 315- Agreed Value Limited Use.pdf**

**1 page (113 KB)**

10/25/2023 1:53:16 PM

## Total Changes

**7**

## Content

- 5** Replacements
- 1** Insertion
- 1** Deletion

## Styling and Annotations

- 0** Styling
- 0** Annotations

[Go to First Change \(page 1\)](#)

ARIZONA (02)

**315. AGREED VALUE – LIMITED USE AUTOS**

★★ **A. Introduction**

When a Limited Use Vehicle auto is insured for Agreed Value, the rates from the below schedule are added to the vehicle's Other than Collision and Collision premiums after all other rating factors, discounts and surcharges have been applied.

AGREED VALUE	OTC	COLLISION
\$0-\$30,000	\$25	\$26
\$30,001-\$60,000	\$50	\$52
\$60,001-\$90,000	\$75	\$78
\$90,001 and greater	\$100	\$123

**B. Endorsement**

Use **3-3061** Agreed Value Coverage- Limited Use Autos

**316. TeenSMART®**

**A. Introduction**

1. TeenSMART® is a driver improvement course for teen drivers.

**B. Eligibility**

1. TeenSMART® Participation- A discount is applied when the course is purchased. It will be removed if the certification is not completed within six months but can be re-applied once certification is completed.
2. TeenSMART® Certification – A discount is applied when the course is completed.

**C. Rate**

1. TeenSMART® Participation- See Rate Rule **530** for applicable rate factors.
2. TeenSMART® Certification- See Rate Rule **540** for applicable rate factors.

**317. NEW TEEN DRIVER FAMILY LOYALTY DISCOUNT**

**A. Introduction**

1. Based upon the tenure of the named insured with Central Mutual, a rate factor is applied to Single Limit Liability, Bodily Injury, Property Damage, Medical Payments, and Collision for youthful operators who:
  - a. Are less than age 20; and
  - b. Are newly added to the policy on or after March 1, 2015
2. For purposes of this rule, the policy age is determined by the original inception date of the policy and the current policy's effective date.

# ARIZONA PROPERTY AND CASUALTY RATE AND RULE FILINGS

## PERSONAL AUTOMOBILE INSURANCE

The Property and Casualty Section within the Arizona Department of Insurance (“AZDOI”) has developed the following checklist to help you submit a complete and correct rate and rule filing.

---

*NOTE: This checklist is not intended to serve as an all-inclusive list of requirements. Insurance policies must meet all requirements of Arizona law, regardless of whether the law is summarized in this checklist.*

---

This checklist applies to the following types of insurance (TOI’s) and sub-types:

### 19.0: Personal Auto

- 19.0001 - Private Passenger Auto;
- 19.0002 – Motorcycle;
- 19.0003 - Recreational Vehicle;
- 19.0004 - Other.

This checklist is in addition to the [General Filing Checklist](#)

## FILING REQUIREMENTS

**NOTE – Use and file.** All rate filings must be made within 30 days after the effective date of the rate. Arizona law provides that if the rate or rule does not comply, the AZDOI may issue an order at any time specifying in what respect the filing is in conflict and stating that, within 30 days after the order is issued, the rate is no longer effective. The order will not affect any contract made or issued prior to the effective date of the order. The insurer or rate service organization making the filing may request a hearing pursuant to Arizona Revised Statutes, Title 41, Chapter 6, Article 10. Please ensure that all of the applicable issues below are addressed in your rate filing. [ARS § 20-385](#).

Topic	References*	Requirements
* “§” = Arizona Revised Statutes Section		
<b>At Fault Accidents</b>	<u><a href="#">§ 20-263 (A)</a></u>	Insurers may not implement rating rules that allow for the increase of premiums or tier placement based on accidents or claims that are not caused or significantly contributed to by the actions of the insured. This includes the use of vehicle history scoring.
<b>Automobile Theft Authority Fee</b>	<u><a href="#">§ 41-3451(J)</a></u>	The Arizona Automobile Theft Authority (AATA) per vehicle semiannual fee is \$0.50 or a maximum of \$1.00 per year.
<b>Minimum Limits of Coverage</b>	<u><a href="#">§ 20-266</a></u>	Insurers must make the mandatory minimum liability limits available on all personal auto policies. These limits are defined under ARS §28-4009 as bodily injury limits of \$25,000 per person, \$50,000 per accident, and property damage liability limits of \$15,000 per accident or a combined policy limit (CSL) of \$65,000..

Topic	References*	Requirements
* "§" = Arizona Revised Statutes Section		
<b>Monthly Payment Plans</b>	<a href="#">§20-267</a>	Insurers must <u>offer</u> a monthly payment plan, and may charge an installment fee. Insurers may not charge more than "an amount equal to one and one-half times the monthly premium in addition to the first month's premium."
<b>Motor Vehicle ID Cards</b>	<a href="#">§ 28-4133</a>	Insurers must issue at least two motor vehicle insurance identification cards for a motor vehicle or automobile liability policy that include the Insurers name and the MVD ID Number assigned to the insurer.
<b>Rating Seat Belt Usage</b>	<a href="#">§28-909 (E)</a>	Insurers may not implement rating or underwriting rules that surcharge an applicant, or cancel or non-renew an existing insured, based on vehicle restraint (lap and shoulder belt) violation.
<b>Rating Speed Violations</b>	<a href="#">§28-702.01</a>	Insurers may not implement rating or underwriting rules that surcharge an applicant, or cancel or non-renew an existing insured, based on a moving violation for driving sixty-five miles per hour or less if the maximum speed limit was fifty-five miles per hour.
<b>Safety Equipment</b>	<a href="#">§ 20-264</a>	When offering comprehensive coverage, insurers must also <u>offer</u> a separate rate for safety equipment coverage including glass in windows and doors and plastic material used in the lights for a vehicle, without a deductible.
<b>Credit Score Models</b>	<a href="#">§ 20-2110</a>	The Department requires that provision statements pertaining to § 20-2110(F)1-6 are included in the company UW manual or credit scoring model filed.
<b>Discounts/Surcharges</b>	<a href="#">§ 20-375</a>	The Department requires actuarial support for discounts. This support may be in the form of relativity tables displaying comparisons of profits and losses between policyholders receiving the discount and those that are not. While data specific to Arizona is preferred, national data to support a discount is acceptable.
<b>Confidential Documentation</b>	<a href="#">§ 44-401</a> <a href="#">§ 20-386</a>	Supporting documents provided in a filing, may be recognized as Trade Secret. However, the insurer or filer shall have the burden of asserting to the director that the information is a trade secret.
<b>GLM Models</b>	<a href="#">§ 20-381</a>	All supplementary rate information may be requested by the Department in order to further support the rate filing made. This information may be acknowledged as Trade Secret upon request. Please see the GLM Checklist provided by the Department.
<b>Fees</b>	<a href="#">§ 20-385</a>	Any fees charged by the insured must be included in a filing and actuarially supported via an expense breakdown.
<b>Privacy Notices</b>	<a href="#">§ 20-2104</a>	Privacy notices must be issued to insureds in accordance with statute. Please review the following: <a href="#">§ 20-2104</a> and <a href="#">§ 20-2101</a>
<b>Adverse Action Notices</b>	<a href="#">§ 20-2110</a>	Adverse underwriting decisions must be provided to the insured in accordance with § 20-2110(A-E).
<b>subTOIs</b>		Any Rate or Rate/Rule filing shall use the applicable subTOI when filing rate changes. Do not use "TOI XX Sub-OI Combinations" for filing types Rate or Rate/Rule for Homeowners, Personal Auto, Med Mal, Other Liabilities,



Topic	References*	Requirements
* "§" = Arizona Revised Statutes Section		
		Crop Hail, Commercial Auto, Commercial Multi-Perl, Inland Marine or Mortgage Guarantee filings when the rate change(s) apply to specific subTOI(s). This ensures that any rate change is assigned to the applicable subTOI.

## CERTIFICATION OF COMPANY OFFICER

**NOTE: Filer certification must be completed and signed by an officer of the company.**

I, Brandon Corum, certify on behalf of the company that is submitting this filing that I am responsible for the validity, accuracy and completeness of the enclosures in this filing. To the best of my knowledge and belief each form or rate filing included in this filing: 1) conforms to all of the applicable requirements outlined above; 2) contains no provision(s) previously disapproved or required to be corrected and/or revised by the Arizona Department of Insurance; 3) does not exceed this company's powers, the authority granted by its state of domicile or its Arizona certificate of authority; and 4) complies with all applicable provisions of state or federal law and orders of the Director of Insurance.

Title: Vice President - Personal Lines

Email: Bcorum@central-insurance.com

Phone: 800-716-7218

Date: 10-26-2023

Company Officer Signature: 

**Important Note: Pursuant to ARS § 28-4148, each insurer who cancels or becomes aware of the cancellation or nonrenewal of or failure to renew or issuance of a motor vehicle liability insurance policy issued on a vehicle in this state shall provide to the Department of Transportation all cancellations, non-renewals or new issues for any reason after seven or fewer days have elapsed from the time of processing the cancellation, nonrenewal or new issue of a policy.**

The insurer shall provide the information by electronic data interchange in a format schedule specified by and in a manner prescribed by the Director of the Department of Transportation. ARS § 20-237 provides that if an insurer has failed to comply with the provisions of ARS § 28-4148, the Director of Insurance shall impose a civil penalty for each violation of not more than two hundred fifty dollars (\$250) per day for each day the insurer is in violation of ARS § 28-4148. The Director of Insurance also may suspend the insurer's certificate of authority until the insurer complies with the provisions of section ARS § 28-4148. For further information on reporting the required information, please contact the Arizona Department of Transportation.

## **Memorandum of Actuarial Processes**

I, Ryan Ciaccio, am a Fellow of the Casualty Actuarial Society and have met the qualification standards to issue this statement of actuarial opinion.

This report was prepared in accordance with currently accepted actuarial standards.

Immediately following is a description of the methods used in determining the rate indications.

Undeveloped Total Limit Losses are developed to ultimate and trended to their expected future levels.

For this filing, the accident years used were 2018 thru 2022 with an evaluation date of 3/31/2023.

Loss Development Factors are calculated for each coverage using historical development patterns. Links ratios from one annual evaluation to the next are calculated. We then look at several averages of historical link ratios and judgmentally select the ratios after review of the averages.

Frequency and Severity Trends are selected after a review of annual trends in both company data, as well as ISO and Fast Track data which is used as a complement of credibility. 10,000 claims is used as the full credibility standard for ISO, Fast Track, and CMI data.

Premium Trends are calculated by bringing the 12 month moving average written premiums to the current rate level. We judgmentally select retrospective and prospective premium trends which is primarily based on historical trends.

Trend Factors are applied from the midpoint of the experience year to the midpoint of the period for which rates are being developed, assuming annual rate changes.

Unallocated LAE is included as a factor of incurred losses; the ULAE factor is determined by calculating the average of the last three years of unallocated LAE to incurred losses. Separate ULAE factors are selected for liability and physical damage coverages.

Developed Trended Losses at the projected future date are determined as follows: Undeveloped Losses x Loss Development Factor x Loss Trend x ULAE factor.

Earned Premium at Present Rates are determined by bringing Collected Earned Premiums to their current rate level using standard parallelogram techniques. CSL premiums are split into BI and PD components.

Retrospective Trends are applied up thru the average date in the latest year in the experience period. Prospective Trends apply from this point forward to the average date of the projected experience period that these proposed rates will remain effective.

The Projected Loss Ratio is Developed Trended Losses divided by Premiums at Current Rates trended to expected future rate levels.

Credibility is based on a full credibility standard of 3,000 claims with partial credibility using the square root rule. The Complement of Credibility is the Expected Loss Ratio x (One Year of Prospective Loss Trend / One Year of Prospective Premium Trend).

Fixed Expenses are calculated by averaging the ratios of the last three years of General Expenses and Other Acquisition Expenses ratios.

Variable Expenses include the Premium/Other Taxes Expense ratio, which is based on the latest year. The Commission Expense ratio is based on the average ratio of the latest two years. Our Underwriting Profit ratio is set at 5.5%.

Formula Loss Ratio = (Weighted Projected Loss Ratio x Credibility) + (Trended Expected Loss Ratio x (1 - Credibility)).

Indicated Change by Coverage is calculated as follows: (Formula Loss Ratio + Fixed Expense Ratio) / (1 - Variable Expense Ratio)

The Total Indicated Change is determined by computing the weighted average of the indicated changes for each coverage. The coverage weights are based on the latest years' Projected Earned Premiums by coverage.

# Central Mutual Insurance Personal Auto Filing

Arizona - Proposed Effective Date: 02/01/2024

This memo contains a summary of the proposed changes to our Personal Automobile rates which will be made within this rate filing.

## TABLE OF CONTENTS

The Actuarial Support document contains the following sections and exhibits:

<u>Page</u>	<u>Section or Exhibit</u>
1	Summary Of Changes
2	Impact Of The Proposed Changes
3	Step 000 - Base Rates
4	Step 070 - Model Year
6	Step 120 - Deductible
9	Uninsured Motorists / Underinsured Motorists
12	Policy Level Endorsement Pricing

## SUMMARY OF CHANGES

Exhibits containing rates and factors which will be modified in this rate revision have been provided. We have included comments below describing the changes being made.

### Step 000 - Base Rates

Statewide base rates have been selected such that the targeted impact by coverage is achieved. The targeted impacts are determined based on the indications by coverage.

### Step 070 - Model Year

We have added 2025 and 2026 model years and shifted previous model year factors up two years.

### Step 090 and Step 100 - Liability and Med Pay Symbols

Vehicles will have their Liability and Medical Payment symbols updated to adopt 2020 LPMP symbols.

### Step 120 - Deductible

Increasing comprehensive factors for deductibles including full coverage glass.

### Uninsured Motorists / Underinsured Motorists

Similar to base rates for the main coverages, UM base rates were adjusted iteratively to reach the targeted rate impact for those coverages.

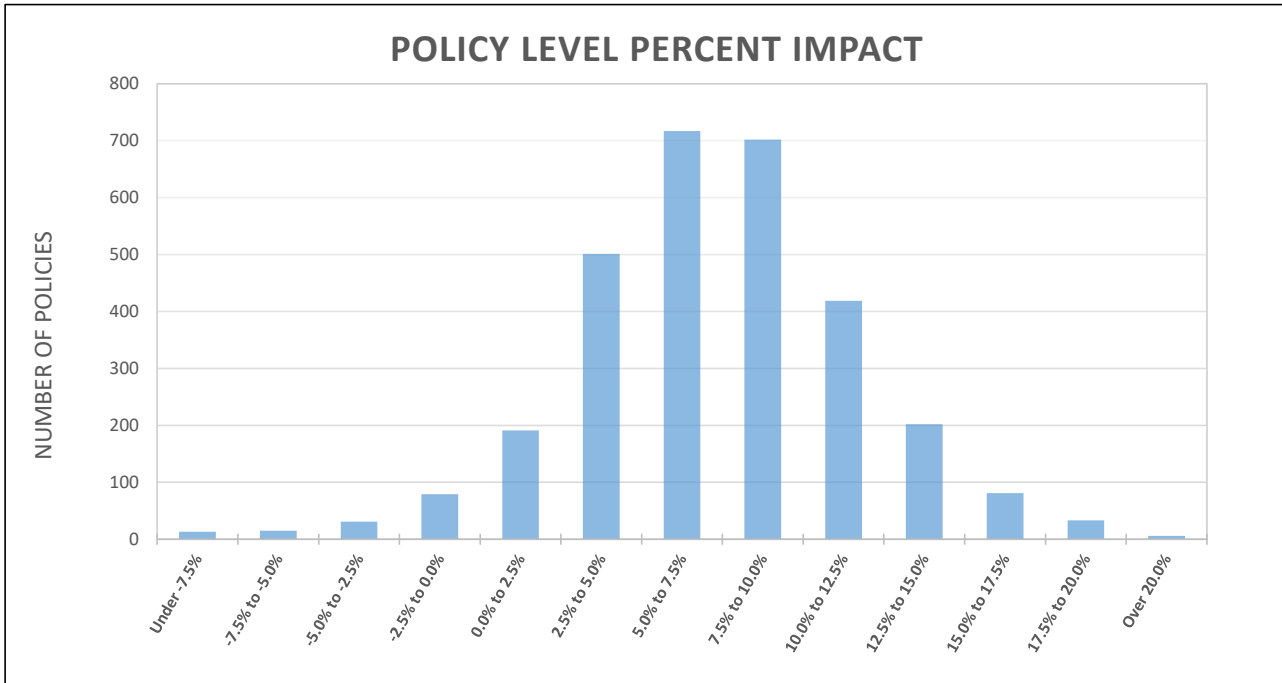
### Policy Level Endorsement Pricing

We propose to increase rates for our Summit, Signature, and Auto Plus endorsements based on our rate level indications.

**IMPACT OF THE PROPOSED CHANGES**

The details of the coverage and policy level impacts are as follows:

<u>Coverage</u>	<u>Current</u>	<u>Proposed</u>	<u>Difference</u>	<u>Change</u>
Bodily Injury	\$1,846,942	\$1,907,860	\$60,918	3.3%
Property Damage	\$1,074,075	\$1,152,007	\$77,932	7.3%
Medical Payments	\$172,454	\$185,449	\$12,995	7.5%
Uninsured Motorist BI	\$661,937	\$727,253	\$65,316	9.9%
Comprehensive	\$1,072,307	\$1,195,694	\$123,387	11.5%
Collision	\$1,606,693	\$1,716,071	\$109,378	6.8%
Summit	\$131,125	\$175,178	\$44,053	33.6%
Signature	\$152,610	\$163,902	\$11,292	7.4%
Auto Plus	\$4,930	\$5,110	\$180	3.7%
All Other Coverages	\$8,553	\$8,553	\$0	0.0%
<b>TOTAL</b>	<b>\$6,731,626</b>	<b>\$7,237,077</b>	<b>\$505,451</b>	<b>7.5%</b>



Minimum	Maximum	Policy-Level % Impact	
		Count	Percent
Under -7.5%		13	0.4%
-7.5%	-5.0%	15	0.5%
-5.0%	-2.5%	31	1.0%
-2.5%	0.0%	79	2.6%
0.0%	2.5%	191	6.4%
2.5%	5.0%	501	16.8%
5.0%	7.5%	717	24.0%
7.5%	10.0%	702	23.5%
10.0%	12.5%	419	14.0%
12.5%	15.0%	202	6.8%
15.0%	17.5%	81	2.7%
17.5%	20.0%	33	1.1%
Over 20.0%		6	0.2%
		<b>2,990</b>	

Minimum % Change      **-17.3%**  
 Maximum % Change      **21.9%**

# Base Rates

	CSL Selected	BI Selected	PD Selected	Med Pay Selected	COMP Selected	COLL Selected
Current	\$451.65	\$173.92	\$187.20	\$32.65	\$212.51	\$374.90
Selected	\$466.07	\$176.09	\$197.78	\$34.64	\$165.78	\$421.91

**Notes:**

Statewide base rates are selected such that the targeted impact by coverage is achieved. The targeted impacts are determined based on the indications by coverage, shown side-by-side below. For the detail behind the overall rate level indications, please refer to the indications file directly. The summary below includes private passenger vehicles only:

Coverage	Current	Proposed	Impact	Indicated
Bodily Injury	\$1,818,901	\$1,879,314	3.3%	3.3%
Property Damage	\$1,057,730	\$1,134,798	7.3%	7.3%
Medical Payments	\$167,237	\$179,891	7.6%	7.6%
Uninsured Motorist BI	\$645,636	\$709,488	9.9%	9.9%
Comprehensive	\$1,003,191	\$1,125,705	12.2%	12.2%
Collision	\$1,562,080	\$1,669,605	6.9%	6.9%
Auto Plus	\$4,930	\$5,110	3.7%	5.0%
Summit	\$131,125	\$175,178	33.6%	34.0%
Signature	\$152,610	\$163,902	7.4%	7.5%

# Model Year

<b>Model Year Factor</b>	<b>CSL Current</b>	<b>BI Current</b>	<b>PD Current</b>	<b>Med Pay Current</b>	<b>Comp Current</b>	<b>Coll Current</b>
2024	1.000	1.000	1.000	1.000	1.001	1.000
2023	1.000	1.000	1.000	1.000	1.001	1.000
2022	1.000	1.000	1.000	1.000	1.001	1.000
2021	1.000	1.000	1.000	1.000	1.001	1.000
2020	1.000	1.000	1.000	1.000	1.000	1.000
2019	1.000	1.000	1.000	1.000	0.993	0.997
2018	1.000	1.000	1.000	1.000	0.982	0.987
2017	1.000	1.000	1.000	1.000	0.965	0.971
2016	1.000	1.000	1.000	1.000	0.943	0.948
2015	1.000	1.000	1.000	1.000	0.916	0.918
2014	1.000	1.000	1.000	1.000	0.883	0.882
2013	1.000	1.000	1.000	1.000	0.846	0.840
2012	1.000	1.000	1.000	1.000	0.803	0.791
2011	1.000	1.000	1.000	1.000	0.755	0.735
2010	1.000	1.000	1.000	1.000	0.702	0.673
2009	1.000	1.000	1.000	1.000	0.644	0.604
2008	1.000	1.000	1.000	1.000	0.580	0.529
2007	1.000	1.000	1.000	1.000	0.512	0.450
2006	1.000	1.000	1.000	1.000	0.450	0.450
2005	1.000	1.000	1.000	1.000	0.450	0.450
2004	1.000	1.000	1.000	1.000	0.450	0.450
2003	1.000	1.000	1.000	1.000	0.450	0.450
2002	1.000	1.000	1.000	1.000	0.450	0.450
2001	1.000	1.000	1.000	1.000	0.450	0.450
2000	1.000	1.000	1.000	1.000	0.450	0.450
1999	1.000	1.000	1.000	1.000	0.450	0.450
1998	1.000	1.000	1.000	1.000	0.450	0.450
1997	1.000	1.000	1.000	1.000	0.450	0.450
1996	1.000	1.000	1.000	1.000	0.450	0.450
1995	1.000	1.000	1.000	1.000	0.450	0.450
1994	1.000	1.000	1.000	1.000	0.450	0.450
1993	1.000	1.000	1.000	1.000	0.450	0.450
1992	1.000	1.000	1.000	1.000	0.450	0.450
1991	1.000	1.000	1.000	1.000	0.450	0.450
1990	1.000	1.000	1.000	1.000	0.450	0.450

# Model Year

Model Year Factor	CSL Selected	BI Selected	PD Selected	Med Pay Selected	Comp Selected	Coll Selected
2026	1.000	1.000	1.000	1.000	1.001	1.000
2025	1.000	1.000	1.000	1.000	1.001	1.000
2024	1.000	1.000	1.000	1.000	1.001	1.000
2023	1.000	1.000	1.000	1.000	1.001	1.000
2022	1.000	1.000	1.000	1.000	1.000	1.000
2021	1.000	1.000	1.000	1.000	0.993	0.997
2020	1.000	1.000	1.000	1.000	0.982	0.987
2019	1.000	1.000	1.000	1.000	0.965	0.971
2018	1.000	1.000	1.000	1.000	0.943	0.948
2017	1.000	1.000	1.000	1.000	0.916	0.918
2016	1.000	1.000	1.000	1.000	0.883	0.882
2015	1.000	1.000	1.000	1.000	0.846	0.840
2014	1.000	1.000	1.000	1.000	0.803	0.791
2013	1.000	1.000	1.000	1.000	0.755	0.735
2012	1.000	1.000	1.000	1.000	0.702	0.673
2011	1.000	1.000	1.000	1.000	0.644	0.604
2010	1.000	1.000	1.000	1.000	0.580	0.529
2009	1.000	1.000	1.000	1.000	0.512	0.450
2008	1.000	1.000	1.000	1.000	0.450	0.450
2007	1.000	1.000	1.000	1.000	0.450	0.450
2006	1.000	1.000	1.000	1.000	0.450	0.450
2005	1.000	1.000	1.000	1.000	0.450	0.450
2004	1.000	1.000	1.000	1.000	0.450	0.450
2003	1.000	1.000	1.000	1.000	0.450	0.450
2002	1.000	1.000	1.000	1.000	0.450	0.450
2001	1.000	1.000	1.000	1.000	0.450	0.450
2000	1.000	1.000	1.000	1.000	0.450	0.450
1999	1.000	1.000	1.000	1.000	0.450	0.450
1998	1.000	1.000	1.000	1.000	0.450	0.450
1997	1.000	1.000	1.000	1.000	0.450	0.450
1996	1.000	1.000	1.000	1.000	0.450	0.450
1995	1.000	1.000	1.000	1.000	0.450	0.450
1994	1.000	1.000	1.000	1.000	0.450	0.450
1993	1.000	1.000	1.000	1.000	0.450	0.450
1992	1.000	1.000	1.000	1.000	0.450	0.450
1991	1.000	1.000	1.000	1.000	0.450	0.450
1990	1.000	1.000	1.000	1.000	0.450	0.450

**Notes:**

We have added 2025 and 2026 model years and shifted previous model year factors up two years.

# Deductible

Deductible	Full Coverage Glass	CSL Current	BI Current	PD Current	Med Pay Current	Comp Current	Coll Current
Full Coverage	N/A	1.000	1.000	1.000	1.000	1.850	N/A
\$50	No	1.000	1.000	1.000	1.000	1.700	N/A
\$100	No	1.000	1.000	1.000	1.000	1.570	1.210
\$200	No	1.000	1.000	1.000	1.000	1.340	1.140
\$250	No	1.000	1.000	1.000	1.000	1.250	1.110
\$500	No	1.000	1.000	1.000	1.000	1.000	1.000
\$1,000	No	1.000	1.000	1.000	1.000	0.760	0.850
\$1,500	No	1.000	1.000	1.000	1.000	0.630	0.720
\$2,000	No	1.000	1.000	1.000	1.000	0.540	0.620
\$2,500	No	1.000	1.000	1.000	1.000	0.460	0.540
\$5,000	No	1.000	1.000	1.000	1.000	0.400	0.450
\$10,000	No	1.000	1.000	1.000	1.000	0.280	0.360
\$50	Yes	1.000	1.000	1.000	1.000	1.819	N/A
\$100	Yes	1.000	1.000	1.000	1.000	1.790	1.210
\$200	Yes	1.000	1.000	1.000	1.000	1.742	1.140
\$250	Yes	1.000	1.000	1.000	1.000	1.713	1.110
\$500	Yes	1.000	1.000	1.000	1.000	1.610	1.000
\$1,000	Yes	1.000	1.000	1.000	1.000	1.474	0.850
\$1,500	Yes	1.000	1.000	1.000	1.000	1.367	0.720
\$2,000	Yes	1.000	1.000	1.000	1.000	1.296	0.620
\$2,500	Yes	1.000	1.000	1.000	1.000	1.191	0.540
\$5,000	Yes	1.000	1.000	1.000	1.000	1.036	0.450
\$10,000	Yes	1.000	1.000	1.000	1.000	0.895	0.360



# Deductible

Deductible	Full Coverage Glass	CSL Selected	BI Selected	PD Selected	Med Pay Selected	Comp Selected	Coll Selected
Full Coverage	N/A	1.000	1.000	1.000	1.000	1.850	
\$50	No	1.000	1.000	1.000	1.000	1.700	
\$100	No	1.000	1.000	1.000	1.000	1.570	1.210
\$200	No	1.000	1.000	1.000	1.000	1.340	1.140
\$250	No	1.000	1.000	1.000	1.000	1.250	1.110
\$500	No	1.000	1.000	1.000	1.000	1.000	1.000
\$1,000	No	1.000	1.000	1.000	1.000	0.760	0.850
\$1,500	No	1.000	1.000	1.000	1.000	0.630	0.720
\$2,000	No	1.000	1.000	1.000	1.000	0.540	0.620
\$2,500	No	1.000	1.000	1.000	1.000	0.460	0.540
\$5,000	No	1.000	1.000	1.000	1.000	0.400	0.450
\$10,000	No	1.000	1.000	1.000	1.000	0.280	0.360
\$50	Yes	1.000	1.000	1.000	1.000	2.720	
\$100	Yes	1.000	1.000	1.000	1.000	2.677	1.210
\$200	Yes	1.000	1.000	1.000	1.000	2.602	1.140
\$250	Yes	1.000	1.000	1.000	1.000	2.581	1.110
\$500	Yes	1.000	1.000	1.000	1.000	2.473	1.000
\$1,000	Yes	1.000	1.000	1.000	1.000	2.387	0.850
\$1,500	Yes	1.000	1.000	1.000	1.000	2.129	0.720
\$2,000	Yes	1.000	1.000	1.000	1.000	2.086	0.620
\$2,500	Yes	1.000	1.000	1.000	1.000	1.613	0.540
\$5,000	Yes	1.000	1.000	1.000	1.000	1.403	0.450
\$10,000	Yes	1.000	1.000	1.000	1.000	1.212	0.360

**Notes:**

Increasing comprehensive factors for deductibles including full coverage glass.

# Deductible - Comprehensive Factor Analysis

Deductible	Full Coverage Glass	CMI Comp Current	Progressive	CSAA	GEICO	CMI Comp Selected	Percent Change
Full Coverage	N/A	1.850			4.184	1.850	0.0%
50	No	1.700		2.002	2.632	1.700	0.0%
100	No	1.570	1.989	1.696	2.000	1.570	0.0%
200	No	1.340	1.473		1.474	1.340	0.0%
250	No	1.250	1.258	1.261	1.395	1.250	0.0%
500	No	1.000	1.000	1.000	1.000	1.000	0.0%
1000	No	0.760	0.914	0.769	0.684	0.760	0.0%
1500	No	0.630	0.688	0.644		0.630	0.0%
2000	No	0.540	0.591	0.541	0.605	0.540	0.0%
2500	No	0.460	0.430	0.453	0.579	0.460	0.0%
5000	No	0.400				0.400	0.0%
10000	No	0.280				0.280	0.0%
50	Yes	1.819	2.720	4.024	3.895	2.720	49.5%
100	Yes	1.790	2.677	3.505	3.316	2.677	49.6%
200	Yes	1.742	2.602		3.053	2.602	49.4%
250	Yes	1.713	2.581	3.006	2.921	2.581	50.7%
500	Yes	1.610	2.473	2.792	2.632	2.473	53.6%
1000	Yes	1.474	2.387	2.511	2.368	2.387	61.9%
1500	Yes	1.367	2.129			2.129	55.7%
2000	Yes	1.296	2.086	2.410	2.158	2.086	61.0%
2500	Yes	1.191	1.613	2.372	2.105	1.613	35.4%
5000	Yes	1.036				1.403	35.4%
10000	Yes	0.895				1.212	35.4%

**Note:**

This analysis indicates that the current CMI comprehensive rates for deductible including full coverage glass are lagging behind many of our industry competitors. We are selecting Progressive's factors for deductibles with full coverage glass because they are in the lower end range of the competitor factors. All competitor rates have been rebased to the 500 deductible without full coverage glass.

## Un/Under - Insured Motorists

### Current Rates

#### Uninsured Motorists Single Limit

LIMIT	Territory Group A		Territory Group B	
	Single Car	Multi-Car per Car	Single Car	Multi-Car per Car
65,000	58	46	38	30
75,000	62	51	43	33
100,000	69	55	46	36
200,000	85	69	59	48
300,000	97	77	66	52
500,000	98	78	68	54

#### Uninsured Motorists Bodily Injury

LIMIT	Territory Group A		Territory Group B	
	Single Car	Multi-Car per Car	Single Car	Multi-Car per Car
25,000 / 50,000	40	32	28	22
50,000 / 100,000	55	45	38	30
100,000 / 300,000	71	57	48	38
250,000 / 500,000	92	74	62	51
300,000 / 300,000	97	77	66	52
500,000 / 500,000	98	78	68	54

#### Uninsured and Under-Insured Motorists Single Limit

LIMIT	Territory Group A		Territory Group B	
	Single Car	Multi-Car per Car	Single Car	Multi-Car per Car
65,000	121	97	83	66
75,000	132	106	90	72
100,000	161	129	109	87
200,000	224	179	153	123
300,000	269	216	184	147
500,000	304	242	205	164

#### Uninsured and Under-Insured Motorists Bodily Injury

LIMIT	Territory Group A		Territory Group B	
	Single Car	Multi-Car per Car	Single Car	Multi-Car per Car
25,000 / 50,000	61	49	43	33
50,000 / 100,000	104	83	71	57
100,000 / 300,000	167	133	113	90
250,000 / 500,000	259	207	176	141
300,000 / 300,000	269	216	184	147
500,000 / 500,000	304	242	205	164

Refer to the Territory Definitions to determine which UM Territory Group each Zip Code (Territory) falls within.

## Un/Under - Insured Motorists

### Proposed Rates

#### Uninsured Motorists Single Limit

LIMIT	Territory Group A		Territory Group B	
	Single Car	Multi-Car per Car	Single Car	Multi-Car per Car
65,000	63	50	41	33
75,000	67	55	47	36
100,000	75	60	50	39
200,000	92	75	64	52
300,000	105	84	72	56
500,000	106	85	74	59

#### Uninsured Motorists Bodily Injury

LIMIT	Territory Group A		Territory Group B	
	Single Car	Multi-Car per Car	Single Car	Multi-Car per Car
25,000 / 50,000	43	35	30	24
50,000 / 100,000	60	49	41	33
100,000 / 300,000	77	62	52	41
250,000 / 500,000	100	80	67	55
300,000 / 300,000	105	84	72	56
500,000 / 500,000	106	85	74	59

#### Uninsured and Under-Insured Motorists Single Limit

LIMIT	Territory Group A		Territory Group B	
	Single Car	Multi-Car per Car	Single Car	Multi-Car per Car
65,000	131	105	90	72
75,000	143	115	98	78
100,000	175	140	118	94
200,000	243	194	166	134
300,000	292	235	200	160
500,000	330	263	223	178

#### Uninsured and Under-Insured Motorists Bodily Injury

LIMIT	Territory Group A		Territory Group B	
	Single Car	Multi-Car per Car	Single Car	Multi-Car per Car
25,000 / 50,000	66	53	47	36
50,000 / 100,000	113	90	77	62
100,000 / 300,000	181	144	123	98
250,000 / 500,000	281	225	191	153
300,000 / 300,000	292	235	200	160
500,000 / 500,000	330	263	223	178

Refer to the Territory Definitions to determine which UM Territory Group each Zip Code (Territory) falls within.

## Un/Under - Insured Motorists

### Change

#### Uninsured Motorists Single Limit

LIMIT	Territory Group A		Territory Group B	
	Single Car	Multi-Car per Car	Single Car	Multi-Car per Car
65,000	+8.6%	+8.7%	+7.9%	+10.0%
75,000	+8.1%	+7.8%	+9.3%	+9.1%
100,000	+8.7%	+9.1%	+8.7%	+8.3%
200,000	+8.2%	+8.7%	+8.5%	+8.3%
300,000	+8.2%	+9.1%	+9.1%	+7.7%
500,000	+8.2%	+9.0%	+8.8%	+9.3%

#### Uninsured Motorists Bodily Injury

LIMIT	Territory Group A		Territory Group B	
	Single Car	Multi-Car per Car	Single Car	Multi-Car per Car
25,000 / 50,000	+7.5%	+9.4%	+7.1%	+9.1%
50,000 / 100,000	+9.1%	+8.9%	+7.9%	+10.0%
100,000 / 300,000	+8.5%	+8.8%	+8.3%	+7.9%
250,000 / 500,000	+8.7%	+8.1%	+8.1%	+7.8%
300,000 / 300,000	+8.2%	+9.1%	+9.1%	+7.7%
500,000 / 500,000	+8.2%	+9.0%	+8.8%	+9.3%

#### Uninsured and Under-Insured Motorists Single Limit

LIMIT	Territory Group A		Territory Group B	
	Single Car	Multi-Car per Car	Single Car	Multi-Car per Car
65,000	+8.3%	+8.2%	+8.4%	+9.1%
75,000	+8.3%	+8.5%	+8.9%	+8.3%
100,000	+8.7%	+8.5%	+8.3%	+8.0%
200,000	+8.5%	+8.4%	+8.5%	+8.9%
300,000	+8.6%	+8.8%	+8.7%	+8.8%
500,000	+8.6%	+8.7%	+8.8%	+8.5%

#### Uninsured and Under-Insured Motorists Bodily Injury

LIMIT	Territory Group A		Territory Group B	
	Single Car	Multi-Car per Car	Single Car	Multi-Car per Car
25,000 / 50,000	+8.2%	+8.2%	+9.3%	+9.1%
50,000 / 100,000	+8.7%	+8.4%	+8.5%	+8.8%
100,000 / 300,000	+8.4%	+8.3%	+8.8%	+8.9%
250,000 / 500,000	+8.5%	+8.7%	+8.5%	+8.5%
300,000 / 300,000	+8.6%	+8.8%	+8.7%	+8.8%
500,000 / 500,000	+8.6%	+8.7%	+8.8%	+8.5%

Refer to the Territory Definitions to determine which UM Territory Group each Zip Code (Territory) falls within.

# Policy Level Endorsement Pricing

## Auto Plus Endorsement

Current Rate:                 \$50   Initial private passenger, classic, antique or corporate auto  
                                      \$2    Each additional private passenger, classic, antique or corporate auto:

Proposed Rate:             \$50   Initial private passenger, classic, antique or corporate auto  
                                      \$4    Each additional private passenger, classic, antique or corporate auto:

## Central Mutual Summit®

Current Rate:                 \$75   Initial private passenger, classic, antique or corporate auto  
                                      \$20   Each additional private passenger, classic, antique or corporate auto:

Proposed Rate:             \$98   Initial private passenger, classic, antique or corporate auto  
                                      \$29   Each additional private passenger, classic, antique or corporate auto:

## Central Signature®

Current Rate:                 \$105   Initial private passenger, classic, antique or corporate auto  
                                      \$30    Each additional private passenger, classic, antique or corporate auto:

Proposed Rate:             \$113   Initial private passenger, classic, antique or corporate auto  
                                      \$32    Each additional private passenger, classic, antique or corporate auto:

**Note:**

We propose to increase rates for our Auto Plus, Summit, and Signature endorsement based on our rate level indications.

# GENERAL FILING CHECKLIST

Notice - This document contains checklists that provide the following three types of information:

- **Checklist 1:** Requirements that apply to all filings (form, rate or rule) – Page 1
- **Checklist 2:** Requirements that apply to all form filings – Page 2
- **Checklist 3:** Requirements that apply to all rate/rule filings – Page 7

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***NOTE:** This checklist and any TOI specific checklist is not intended to serve as an all-inclusive list of requirements. Insurance policies must meet all requirements of Arizona law, regardless of whether the law is summarized in this and any other checklist.*

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General Filing Checklist 1: Requirements That Apply to ALL FILINGS	
Topic	Requirements
<b>Authorized Company</b>	Before submitting a filing, use our License Search web page ( <a href="https://insurance.az.gov/license-search">https://insurance.az.gov/license-search</a> ) to ensure the insurer is authorized to sell the type of insurance (“TOI”) in Arizona.
<b>Authorized Filer</b>	If the filer is not an employee of the insurer, include a <b>Third-party Authorization Form</b> signed by an authorized representative of the insurance company as a “supporting document” within SERFF. The authorization only applies to the filing to which it is included; each other filing requires its own third-party authorization.
<b>Corresponding Filing Tracking Number</b>	For a current filing that refers to a previously approved filing, enter the previous SERFF tracking number in the SERFF Corresponding Filing Tracking Number field.
<b>Effective Dates</b>	Do not enter “Upon Approval” in “SERFF Effective Date Requested” fields. After AZDOI has acknowledged or approved a filing, you may file a post-submission update to change the effective date.  Effective Dates for Renewing and New Business Rate filings may differ only if the difference reflects the renewal time frame notification used by the insurer. For Form filings, if the insurer has a liberalization clause in their policy forms, there should not be a difference in form effective dates.
<b>Multi-company Filing</b>	You may, in a single filing, submit forms, rates and rules to be utilized by multiple companies. To do so, [a] ensure that all companies are authorized in Arizona for the specific TOI; [b] use the SERFF “Companies and Contacts” section to identify each company that will use the filed forms, rates and rules.

<b>General Filing Checklist 2: Requirements That Apply to FORM FILINGS</b>	
<b>Topic and References*</b>	<b>Requirements</b>
* “§” = Arizona Revised Statutes Section; “R” = Arizona Administrative Code Rule	
<b>Filing Deadline</b> <a href="#">§ 20-398</a>	<b>An insurer must file forms at least 30 days before using them.</b> The AZDOI will determine what forms it will review within the 30-day period; however, regardless of whether the AZDOI reviews a form within 30 days, the form must comply with the requirements of Arizona law. A form is deemed approved if not disapproved within the 30-day period.
<b>Definition of “Policy”</b> <a href="#">§ 20-1102</a>	<b>“Policy”</b> means an insurance contract or a certificate of an insurance contract, including clauses, riders, endorsements and any other materials that are made part of the policy.
<b>Contents of Policy</b> <a href="#">§ 20-1113</a>	Except as to surety contracts or group insurance contracts, every policy must specify: <ol style="list-style-type: none"> <li>1. The names of the parties to the contract;</li> <li>2. The insurer's name;</li> <li>3. The subject of the insurance;</li> <li>4. The risks covered by the policy;</li> <li>5. The time when coverage becomes effective and the period during which the insurance coverage remains in force;</li> <li>6. The premium;</li> <li>7. The conditions pertaining to the insurance.</li> </ol>
<b>Form Name and Number</b>	Assign to each form a unique form name, number and edition date; enter the edition date in the SERFF “Form Schedule” section; and, include the same form number and edition date in the lower left corner of every page of each form.
<b>Multi-company Form Filing</b>	For a multi-company form, you may use bracketing (e.g. “[ <b>INSURANCE COMPANY NAME</b> ]”). In lieu of an insurer’s name but you must list all the companies in the SERFF “Companies and Contacts” section for the filing.
<b>Form Revisions</b>	If amending or endorsing a form that was not previously filed in SERFF but via paper submittal (and therefore was not assigned a SERFF Tracking Number), include the original form as part of the filing.  Include a side-by-side comparison or red-lined version that shows the changes being made to the previously approved form.
<b>Acceptable Submission Formats</b>	Submit the final version of policy forms and any document requiring a signature in Adobe Acrobat (PDF) format.



General Filing Checklist 2: Requirements That Apply to FORM FILINGS	
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	Complete/populate applications and declaration forms with John/Jane Doe information and submit them in the SERFF Supporting Documents section.
<b>Annul/Void/ Rescind for Applicant Misrepresentation</b> <a href="#">§ 20-1109</a> <a href="#">§ 20-1123</a> <a href="#">Smith v. Republic National Life Insurance Co., 483 P.2d 527 (1971)</a> <a href="#">State Compensation Fund v. Mar Pac Helicopter Corporation, 752 P.2d 1,156 Ariz. 348 (1987)</a> <a href="#">Greves v. Ohio State Life Insurance</a>	<p>An application cannot require an applicant to “warrant” or “guaranty” statements and descriptions the applicant makes when applying or negotiating for insurance. Statements and descriptions an applicant makes are deemed “representations.”</p> <p>The insurer may rescind a policy or deny benefits based on statements that an applicant makes when applying or negotiating for insurance ONLY if an application for coverage contained misrepresentations, omissions, concealment of facts or incorrect statements that were ALL of the following:</p> <ul style="list-style-type: none"> <li>• fraudulent,</li> <li>• material,</li> <li>• such that the insurer would not have issued the policy, would have issued a policy for a smaller amount, or would not have provided coverage of hazards, had the insurer been provided complete or true information.</li> </ul> <p>The policy (and any other agreement between the insurer and insured) cannot retroactively annul/void an insurance contract insuring against loss or damage through legal liability for an individual’s bodily injury or death by accident, or for damage to a person’s property, after the occurrence of any injury, death or damage for which the insured may be liable. :</p>
<b>Application</b>	Include with the filing an application that is incorporated by reference in, or attached to, the policy. You do not need to file an application that is not part of the policy.
<b>Arbitration</b> <a href="#">§ 12-1501</a>	An insurer cannot limit a person solely to arbitration as a remedy concerning the revocation of the contract.
<b>Binders</b> <a href="#">§ 20-1120</a>	By default, binders include all the policy terms and any endorsements designated in the binder except as superseded by clear and express terms of the binder. A binder is effective until the earlier of the date the underlying policy becomes effective or 90 days beyond issuance.
<b>Producer Name</b> <a href="#">§ 20-229</a>	The policy declaration page or endorsement must identify the name of the producer unless the policy is exempt from the requirement under <a href="#">§ 20-229(B)</a> .

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<b>Authorized Signature</b> <a href="#">§ 20-1116</a>	Every insurance policy shall be executed by an officer, attorney-in-fact, employee or representative duly authorized by the insurer.
<b>Discrimination, Unfair</b> <a href="#">§ 20-448(C)</a>	An insurer cannot unfairly discriminate in the terms or conditions of an insurance contract against particular insureds or subjects of insurance that have like risk and exposure factors or expense elements to other insureds or subjects of insurance.
<b>Domestic Violence Exception</b> <a href="#">§ 20-448(G), (J) and (L)(3)</a>	An insurer may not deny a claim, or exclude or limit coverage associated with domestic violence.
<b>Foreign Language</b> <a href="#">R20-6-203</a>	<p>Only use a translator who has formal college-level or specialized training in the foreign language, including training in grammar and sentence syntax.</p> <p>Include in the SERFF Supporting Documents section:</p> <ul style="list-style-type: none"> <li>• A version of the form containing a side-by-side comparison of the foreign language verbiage with English-language translation;</li> <li>• A notarized sworn statement signed by the translator that describes the translator’s qualifications and attests that the English translation is identical in substance to the foreign-language document or material.</li> </ul> <p>If a foreign-language version of a document was previously filed in English, identify the English version SERFF Tracking Number in the SERFF Corresponding Filing Tracking Number field.</p>
<b>Inducements</b> <a href="#">§ 20-452</a>	<p>A form or any advertisement may not offer or provide for any of the following inducements:</p> <ul style="list-style-type: none"> <li>• Employment;</li> <li>• Shares of stock or other securities;</li> <li>• Advisory board contract or similar agreement providing for special profits;</li> <li>• Prizes, goods, wares, merchandise or tangible property with an aggregate value of over \$100 except to provide remuneration of up to \$200 for providing customer feedback.</li> </ul>
<b>Rebates</b> <a href="#">§ 20-451</a>	A form or advertisement may not offer, pay, allow or give any rebate, discount, abatement, credit or reduction of premium that has not been filed with the Department

General Filing Checklist 2: Requirements That Apply to FORM FILINGS	
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<b>Name Change</b>	The insurer must receive approval for its name change by the AZDOI Financial Affairs Division before you file a name-change endorsement (regardless of the effective date).
<b>Personal Information: Disclosure Authorization</b> <a href="#">§ 20-2101(19)</a> <a href="#">§ 20-2106(7)(b)</a> <a href="#">§ 20-2113</a>	Any form that is used as a disclosure authorization form must be written in plain language, be dated, specify types of persons authorized to disclose information about the individual, specify the nature of information authorized for disclosure, name the insurance institution or insurance producer, refer to the insurance institution to whom the individual is authorizing information to be disclosed, specify the purposes for which the information is collected (which must be within the scope of authority provided in <a href="#">§ 20-2113</a> ), and for an application or reinstatement of a policy, specify the time the authorization is valid which shall not exceed one year.
<b>Personal Information: Notice of Information Practices</b> <a href="#">§ 20-2104</a> <a href="#">20-2113</a> <a href="#">R20-6-2101 through 2104.</a>	Include in the SERFF Supporting Documents section the notice of information practices that the insurer or producer will provide to applicants and policyholders in connection with insurance transactions, or note the SERFF tracking number of a previously approved SERFF filing containing the notice of information practices.
<b>Readability: Policy Verbiage</b> <i>Applies to all forms</i> <a href="#">§ 20-1111,</a> <a href="#">§ 20-1095.09</a>	Policy language and titles, headings, etc. cannot be misleading, inconsistent or ambiguous, and must include any language necessary to make the policy not misleading.
<b>Readability: Policy Verbiage</b> <i>Applies to private passenger automobile, homeowners, mobile homeowners and personal-line dwelling insurance.</i> <a href="#">R20-6-210</a>	<p>A person must be able to read and reasonably understand an insurance policy without special knowledge or training.</p> <ul style="list-style-type: none"> <li>• Write the policy in everyday, conversational language using short, simple sentences comprised of commonly used words, using an easy-to-read style, personal pronouns and present tense active verbs.</li> <li>• Place defined words and terms in a separate section at the beginning of the policy.</li> <li>• Exclude non-essential provisions from the policy.</li> <li>• Do not file a policy unless it has a Flesch Score of 40 or more. If a single form does not meet the minimum readability score, it</li> </ul>

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	may be scored with the remainder of the policy to meet the score.
<b>Readability: Organization of Policy Content</b> <i>Applies to private passenger automobile, homeowners, mobile homeowners and personal-line dwelling insurance.</i> <a href="#">R20-6-210</a>	Organize the policy into logically arranged sections to ease locating content. <ul style="list-style-type: none"> <li>• In each section, only include provisions that relate to that section (<i>for example, an exclusion section shall not be mixed with other parts of a policy</i>),</li> <li>• Group, in a common area, general policy provisions that apply to all or several like coverages.</li> </ul>
<b>Readability: Visual Aids</b> <i>Applies to private passenger automobile, homeowners, mobile homeowners and personal-line dwelling insurance.</i> <a href="#">R20-6-210</a>	Incorporate the following visual aids: <ul style="list-style-type: none"> <li>• Use at least eight point;</li> <li>• Use a legible block-print font; do not use a script font;</li> <li>• Distinguish captions and headings from the general text;</li> <li>• Use sufficient white space to distinctly separate coverages, policy sections and columns;</li> <li>• Distinguish defined words and terms from the general text.</li> </ul>
<b>Statute Citations</b>	When citing an Arizona statute or rule, include or paraphrase the statute or rule verbiage in the document. The insured cannot be expected to look up laws or rules concerning insurance policy provisions.

General Filing Checklist 3: Requirements That Apply to RATE AND RULE FILINGS	
Topic and References*	Requirements
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<p><b>Filing Deadlines</b></p> <p><a href="#">§ 20-344</a> (Rating Org.)  <a href="#">§ 20-357</a> (WC Ins.)  <a href="#">§ 20-358</a> (WC Ins.)  <a href="#">§ 20-376</a> (Title Ins.)  <a href="#">§ 20-378</a> (Title ins.)  <a href="#">§ 20-1610</a> (Credit)  <a href="#">§ 20-1621.04</a> (Credit)  <a href="#">§ 20-385</a> (Art. 4.1)  <a href="#">§ 20-388</a> (Art. 4.1)</p>	<p>The following “<b>Article 4 filings</b>” are subject to <b><i>file and use with a 30-day waiting period</i></b> (meaning insurers must submit filings at least 30 days before using them):</p> <ul style="list-style-type: none"> <li>• rating organization loss cost and rates,</li> <li>• workers’ compensation deviations,</li> <li>• title rates,</li> <li>• credit property and credit unemployment rates.</li> </ul> <p>Within the 30-day waiting period, AZDOI can disapprove an Article 4 filing without a hearing. If the AZDOI does not disapprove an Article 4 filing within the 30-day waiting period, the rate/rule is deemed approved and the AZDOI would need to conduct a hearing if it believes the rate/rule does not comply with Arizona law.</p> <p>Rate filings for all other lines (“<b>Article 4.1 filings</b>”) are subject to <b><i>use and file within 30 days of the effective date</i></b> (meaning insurers must file no later than 30 days after beginning to use the rates).</p> <p>Generally, the AZDOI will only acknowledge receipt of the filing. If a filing does not comply with Arizona law, the AZDOI may issue an order at any time (even after the 30-day period) that prevents the insurer from using the rate starting 30 days after the order. The insurer or rate service organization may request a hearing to appeal per to <a href="#">A.R.S. Title 41, Chapter 6, Art. 10.</a></p>
<b>Rate/Rule Justification</b>	<p>Provide justification in the SERFF supporting documents section that demonstrates how rates were developed; explains why rates should not be considered excessive, inadequate or unfairly discriminatory; and, includes reasoning underlying actuarial assumptions and other aspects in developing the rates.</p>
<b>subTOIs</b>	<p>Any Rate or Rate/Rule filing shall use the applicable subTOI when filing rate changes. Do not use “TOI XX Sub-TOI Combinations” for filing types Rate or Rate/Rule for Homeowners, Personal Auto, Med Mal, Other Liabilities, Crop Hail, Commercial Auto, Commercial Multi-Perl, Inland Marine or Mortgage Guarantee filings when the rate change(s) apply to specific subTOI(s). This ensures that any rate change is assigned to the applicable subTOI.</p>

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<b>SERFF Rate Filing Fields</b>	Complete all applicable “Company Rate Information” fields in the SERFF “Rate/Rule” section when filing a base-rate change.
<b>Multi-company Filing</b>	Submit supporting documentation and specific rate-change information in the SERFF “Rate/Rule” section for each insurer within a multi-company filing.
<b>Discrimination, Unfair</b> <a href="#">§ 20-448(C)</a>	An insurer cannot unfairly discriminate in the rate or amount of premium charged particular insureds or subjects of insurance that have like risk and exposure factors or expense elements to other insureds or subjects of insurance.
<b>ZIP Code Rating</b>	If the insurer uses individual or groupings of ZIP Codes as the basis of rates or rules applicable to a policy, the insurer must account for all Arizona ZIP codes within the insurer’s rating plan.
<b>Fee/Expense Exhibits</b> <a href="#">§ 20-381</a>	When filing fees the insurer must include a complete list or schedule of fees and an expense exhibit that shows how the fee is reasonable in relation to the cost of the service performed. <i>For example, for a late fee, the insurer must show the additional costs it incurs to process a late payment.</i>  The fee the insurer proposes to charge may not exceed the associated reasonable costs.

## CERTIFICATION OF COMPANY OFFICER

**NOTE: Filer certification must be completed and signed by an officer of the company.**

I, Brandon Corum, certify on behalf of the company that is submitting this filing that I am responsible for the validity, accuracy and completeness of the enclosures in this filing. To the best of my knowledge and belief each form or rate filing included in this filing: 1) conforms to all of the applicable requirements outlined above; 2) contains no provision(s) previously disapproved or required to be corrected and/or revised by the Arizona Department of Insurance; 3) does not exceed this company’s powers, the authority granted by its state of domicile or its Arizona certificate of authority; and 4) complies with all applicable provisions of state or federal law and orders of the Director of Insurance.

Title: Vice President - Personal Lines

Email: Bcorum@central-insurance.com

Phone: 800-716-7218 \_\_\_\_\_

Date: 10-26-2023 \_\_\_\_\_

Company Officer Signature: Bob Cow \_\_\_\_\_